

NOTICE OF APPEAL FROM THE EXAMINER TO THE BOARD OF PATENT APPEALS AND INTERFERENCES		Docket Number D2542
I hereby certify that this correspondence is being sent via facsimile on _____ Signature _____ Typed or printed name <u>Carol J. Smith</u>	In re Application of <u>Matthew Waight</u>	RECEIVED CENTRAL FAX CENTER JUN 23 2006
	Application Number <u>09/811,702</u>	
	Filed <u>March 19, 2001</u>	
	For <u>DYNAMIC UPSTREAM AMPLIFIER POWER MANAGEMENT</u>	
	Art Group <u>2614</u>	
Examiner <u>M. R. Shannon</u>		
<p>Applicant hereby appeals to the Board of Patent Appeals and Interferences from the last decision of the examiner.</p> <p>The fee for this Notice of Appeal is (37 CFR 1.17(b)) \$ <u>500.00</u></p> <p><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee shown above is reduced by half, and the resulting fee is: \$ _____</p> <p><input type="checkbox"/> A check in the amount of the fee is enclosed. <u>06/26/2006 TL0111 00000050 502117 09811702</u></p> <p><input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached. <u>02 FC:1401 500.00 DA</u></p> <p><input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account. I have enclosed a duplicate copy of this sheet.</p> <p><input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment to Deposit Account Number <u>502117</u>. I have enclosed a duplicate copy of this sheet.</p> <p><input type="checkbox"/> A petition for an extension of time under 37 CFR 1.136(a) (PTO/SB/22) is enclosed.</p> <p>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</p> <p>I am the</p> <p><input type="checkbox"/> applicant/inventor.</p> <p><input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96)</p> <p><input checked="" type="checkbox"/> attorney or agent of record. Registration number <u>44,489</u></p> <p><input type="checkbox"/> Attorney or agent acting under 37 CFR 1.34(a). Registration number if acting under 37 CFR 1.34(a). _____</p> <p style="text-align: right;"> <u><i>E. T. Cullen</i></u> Signature <u>Lawrence T. Cullen</u> Typed or printed name <u>215-323-1797</u> Telephone number <u>6/23/01</u> Date </p> <p>NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.</p> <p><input type="checkbox"/> * Total of _____ forms are submitted.</p>		